Complete and send	this form, together wi	0 7 2005 S.	ee(s), to: <u>Mail</u>	Mail Stop ISSUI Commissioner for P.O. Box 1450	E FEE or Patents	
, see	. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				ginia 22313-1450	
	- E		or <u>Fax</u>	(703) 746-4000		
maintenance fee notificatio	ns. directed otherwise	in Block I, by (a	E FEE and PUBLIC ders and notification ) specifying a new o	CATION FEE (if required of maintenance fees correspondence address	aired). Blocks 1 through 5 swill be mailed to the current; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPONDEN		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
Sughrue Mion Zinn MacPeak & Seas PLLC				Certificate of Mailing or Transmission		
2100 Pennsylvania Washington, DC 2			I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
07/11/2005 MBEYENE2 00000144 09538469				(Depositor's name)		
01 FC:1501 1400.00 OP						(Signature)
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/538,469	03/29/2000		Kouki Ogawa		Q58486	6688
TITLE OF INVENTION: CAPACITOR BUILT-IN TYPE PRINTED WIRING SUBSTRATE, PRINTED WIRING SUBSTRATE, AND CAPACITOR Adjustment date: 07/11/2005 NBETENE2 07/16/2003 HULDING2 00000014 09538469 01 FC:1501 -1300.00 OP						
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE PI	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$100		\$0 	\$100	07/08/2005
/ EXAMINER		ART UNI 2814	IT C	LASS-SUBCLASS	J	
HA, NA		257-700000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
NGK SPARK PLUG CO., LTD. Aichi, Japan						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):  4b. Payment of Fee(s):						
A check is attached for the NOA Fees payment. Please charge any payment deficiency and credit overpayment to yof this form.  Charge in Entity Status (from status indicated above)						
Advance Order - # of Copies PODA				ment deficiency a	A Fees payment. Pleas nd credit overpayment t of this form is attached.	e dit any overpayment, to
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Authorized Signature Abraham J. Rosner			Date 7-6-05			
Typed or printed name _		Registration No. 33, 276				
Trionandira, Tilbinia 22515	1430.				he public which is to file (an minutes to complete, includir mments on the amount of tin Trademark Office, U.S. Dep S. SEND TO: Commissioner displays a valid OMB control	

OIP PART B - FEE(S) TRANSMITTAL